

## The Students' Comprehension on the Philosophy of Maternity Care "Women Centered Care" Based on the Report of Continuity of Care (COC)

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### ABSTRACT

**Background:** *The mortality rate of maternal woman in Indonesia has significantly increased reaching 359 per 100.000 live births. One solution to decrease the number of mortality rate of maternal woman is through high quality maternity care. The qualified midwives come from a standard of education based on the philosophy of maternity care. Continuity care (COC)maternal clinic model of learning is proven in giving wide chances for the student to learn the philosophy.*

**Objectives:** *reveals the level and form of students' comprehension toward the maternity care "woman centered care"philosophy, the application of PKK-CoC, and the quality of maternity careCoC in STIKES Estu Utomo Boyolali.*

**Method:** *this study is carried under mixed method and sequential explanatory strategy. The quatitative parts are fulfilled by the use of analitic descriptive design, while the quantitative side is carried under case study design. The population and sample of this study is 55 students of STIKES Estu Utomo Boyolali who have taken PKK-CoC. The sample for qualitative design is taken using mixed purposive sampling which are criterion and intensity sampling.*

**Result:** *qualitatively, students overall comprehension is good. However, the documentation of maternity carein partnership care is still ineffective. Quantitatively, students overall comprehension on personalized care, holistic care, collaborative care, and evidence based care is also good. Partnership care is the only aspect considered in effective.*

**Conclusion:** *the maternitycare continuity of care shows that client and family are in good health, all the caregiven shows zero mortality rate, client feels safe and comfortable, and client has correct and fast care. It is also found that students' confidence, skills, and comprehension are increased. It is suggested that the stakeholder can include the PKK-CoC model into curriculum of midwife education.*

**Keywords :***maternity care philosophy, women centered care, continuity care*

### INTRODUCTION

#### Background

The mortality rate of maternal woman in Indonesia, based on Indonesian health demography survey, reaches 359 / 100.000 live births on 2012. The efforts to decrease **AKI** include the provision of competent and professional midwife. This provision is preceded by building a qualified educational institution

which is able to deepen the students' comprehension on midwife philosophy "woman centered care" and facilitate the students in experience gathering and fulfill their duty to public.

The practice of midwife cliniccontinuity of care (PKK CoC) is proven in widening the chance of the students to enhance their comprehension of maternitycarephilosophy. The effort to enhance students comprehension is carried by theoretical

addition and practical implementation to give broad, real and comprehensive experients for the students.

Maternity careon most of the midwife education institution is still using maternity care case target (report quantity evaluation) without any preparation and experience on maternity care continuity (continuity of care) which is unrelated to the philosophy of maternity care.

Thus, a study revealing students' comprehension of maternity care philosophy using continuous maternity care (continuity of care) report is needed.

**Method**

This study is carried under mixed method design and sequential explanatory strategy in which the quantitative data collection and analysis is applied first then followed by qualitative analysis. Quantitative aspect of this study is carried under descriptive analytics while qualitative aspect is carried under case study design.

The sample used for quantitative study is the whole population which is 55students of STIKES Estu Utomo Boyolali who have done PKK-CoC.While qualitatively, the sample is 5 students from 4<sup>th</sup> semester of STIKES Estu Utomo Boyolali in praktik klinik kebidanan *continuity of care* taken using mixed sampling method (criterion and intensify sampling).

**Result**

Qualitatively, the comprehension of students on every aspect (personalized care, holistic care, partnership care, collaborative care and evidence based care) is good. The problem occurs on documentation the report of maternity care on partnership care aspect. Quantitatively, the researcher found similar problem in partnership care.

The result of quantitative study can be seen on table 4.5. below.

**Table 4.5. Categorization and Coding/Meaning on every component of Maternity careContinuity of Care report and Semi-Structured Interview**

<b>Component</b>	<b>Sub Component</b>	<b>Coding/ Meaning</b>	<b>Coding/ Final Meaning</b>
<i>Personalized care</i>	Identifying special needs of every clients	Main complaintsare 1 only found on ante-natal and post-natal care report. However, the complaintsare not found in laborreport. 3	Knowing how to reveal the client's main complaint. 2
		The data shows that the way to reveal clients' main complaints through direct interview. This will reveal clients' problem in detail thus will also reveal clients special needs. However, the interview is not conducted in labor since the client has complication.	Knowing the function of revealing main complaint.
		Giving appropriate care according to clients' needs	Comprehen ding the basic of procedure making 2
		The maternity care report contains suitable to client's main complaint, physical examination, and diagnosis. 3	Comprehen ding the function of procedure in maternal care
		The data shows that certain procedure is needed to point out solutions derived from subjective and objective data analysis, and secondary examination.	
	Honoring the clients' rights to choose the form of care given.	The maternity care report contains evaluation of procedure which is chosen by the clients and its alternatives. 2	Comprehen ding the way to honor clients' rights to choose the form of care given. 2
		The data shows that honoring clients rights can be done through letting the clients know and choose the procedure. This is	Comprehen ding the function of honoring the rights of clients on giving appropriate

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning	Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
<i>Holistic care</i>		for ensuring clients' consent in doing the chosen procedures.	care.			to clients' social needs	contain data of social and economic needs, marriage history, clients' family relationships, and familial supports towards the clients.
	Paying attention to clients' physical needs	The maternity care report should contain complete physical examination result (headtotoe).  The data shows that the way to give attention to clients' physical needs is by doing complete physical examination. This will reveals clients physical problem and their physical needs.	Comprehending the way in attending to clients' physical needs.  Comprehending the functions of physical needs				in attending to clients social needs 2 Comprehending the importance of attending clients' social needs
	Paying attention to clients' psychological needs	The maternity care report should contain psychological data consist of clients anxiety; clients' feeling during pregnancy (graviditas), labor (partus), and puerperium; or refusal on pregnancy graviditas), labor (partus), and puerperium.  The psychological data is obtained by interviewing the clients, and analyze their psychological state. The interview will reveal psychological needs of clients. However, the interview is not conducted in labor since the client has complication.	Comprehending the way in attending to clients psychological needs 2 Comprehending the importance of attending clients' psychological needs.		Paying attention to clients' spiritual needs	The maternity care report should contain data on spiritual activities of clients such as prayers activities, recital during pregnancy (graviditas), labor (partus), and puerperium; zikir recited on pregnancy (graviditas), labor (partus), and puerperium based on clients religion.  Spiritual needs data is acquired by interviewing the clients. This is important to reveal and analyzed spiritual problem clients had. Knowing the problem leads to appropriate way to fulfill clients' spiritual needs. Spiritual needs are not documented during	Comprehending the way in attending to clients spiritual needs  Comprehending the importance of attending clients' spiritual needs 1
	Paying attention	The maternity care report should	Comprehending the way				

<b>Component</b>	<b>Sub Component</b>	<b>Coding/ Meaning</b>	<b>Coding/ Final Meaning</b>	<b>Component</b>	<b>Sub Component</b>	<b>Coding/ Meaning</b>	<b>Coding/ Final Meaning</b>
		pregnancy since there is no prior example and advice from the advisor to do so.				to reveal subjective data such as confirming the social data, psychological data, and family health history. However, this is not documented since the informan following the maternity care report's form. Thus, it is unknowingly by the informan to include family involvement data in the report.	
	Paying attention to clients' cultural needs	The maternity care report should contain clients' cultural data such as traditional customs regarding pregnancy (graviditas), labor (partus), and puerperium which are believed and applied by the clients.	Comprehending the way in attending to clients' cultural needs				
		Cultural needs data is acquired by interviewing the clients' didapatkandengan menanyakan kepada klien. This is important to reveal and analyzed clients' cultural states in order to point out clients' cultural needs. However, the interview is not conducted in labor since the client has complication	Comprehending the importance of attending clients' cultural needs		Cooperating with the client and her family in giving care during pregnancy, labor, and puerperium.	The maternity care report did not mention any cooperation with client's family (husband, parent, parent in-law, siblings, and other family member) on the procedure given.	Comprehending how to cooperate with client's family however it is undocument ed.
<i>Partnership care</i>	Involving the client and her family in identifying needs on every phase (pregnancy, labor, and puerperium)	The maternity care report did not mention any familial (husband, parents, parents in-law, siblings, other family member) involvement on every reports of maternity care given to the researcher (objective, analysis, and procedure).	Comprehending how to involve family in needs identification, however it is undocument ed.			The informan of study stated that they have been involving the family	
					Involving the client in deciding of care	The maternity care report mentions evaluation of each steps of procedure including client's	Comprehending how to involve the client in deciding on

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning	Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
	given during pregnancy, labor, and puerperium	decision to do the care. The data is taken by asking the client to choose wheter she is consented to do the procedure given or not.	care given to her.			that the P4K data is completely obtained. This data is important in handling complication and preparing the clients for referral case.	consultation/ collaboration and referral regarding client's complication.
Collaborative care	Identifying risk factors on clients and discussing with advisor	The maternity care report mentions the analysis of subjective and objective data and secondary examination. Most of them are without consultation sheets.  The informan stated that the analysis is made to identify risk factors based on subjective and objective data and secondary examination. Every care given is always discussed with field and academic advisors including the result of risk factors identification to avoid mistakes. However, the consultation sheets are only attached to main reports; maternity care report did not have them.	Comprehending how to identify risk factors 2 Comprehending that every care including analysis result should be consulted with advisors avoiding any mistakes in care giving.	Accompanying the client in referral case		In referral case, the maternity care report contains the data on student involvement in referral process and also SOAP data when referral case happened. In normal case, the report contains procedure for normal case.  The informan stated that on complication case and in need of referral, the midwife always accompany the client, monitoring client's state according to the procedure applied in referral place. In continuous care, a midwife should monitor and accompany the client the whole time.	Comprehending function of accompanying client in referral case. 2 3 Comprehending the procedure on accompanying client in referral case
	Making consultation / collaboration and referral plan according to complication of client	The maternity care report contains complete data on identification of complication and preparation of P4K ( <i>program perencanaanpersalinan dan pencegahan komplikasi</i> – labor and complication prevention).  The informan stated	Comprehending how to prepare consultation / collaboration and referral regarding client's complication. 2 Comprehending the function of preparing	Monitoring the state of client after referral process		In referral case, the maternity care report contains client's improvement data after referral process and also SOAP data when referral case happened. In normal case, the report contains procedure for normal case.  The informan stated that in	Comprehending the function of monitoring the state of client after referral process 2 Comprehending the procedure of monitoring the state of client after referral process

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
		complication case with referral she monitors client's state after referral according to procedure. By monitoring clients state, midwife care can be given whenever necessary.	
<i>Evidence Based care</i>	Using up to date literature as basis on planning and giving care for clients	The maternity care report contains up to date literature in its content and bibliography. Up to date means published after 2007. The literature is considered as the basis of theory for care given.  The informan stated that the literature is chosen based on the case of clients in case overview (chapter 2). The literature published maximum within 10 years since the report is made. Every informant is able to describe the usage of literature in maternity care. The function of the literature is as the basis on giving maternity care which is written in chapter 3 and discussed on chapter 4.	Comprehending the reason in using up to date literature  Comprehending the function of using up to date literature as basis on planning and giving care for clients  1
	Showing the rationale of the whole maternity care based on the latest evidence for	The rational is included in chapter 3.  The informan stated that rationale is taken from references and sources such as books and previous continuity care	Comprehending how to get the latest basic evidence on efectivity of care.  1  Comprehending the function of

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
	efectivity of care	report (2016). Rationale is very important as evidence of efectivity of every care given.	rationale of whole care given

The result of quantitative study is given in the following table.

**Tabel 4.2 the frequency distribution table of students' comprehension on the philosophy of maternity care "WomenCenteredCare" in every aspects based on the Continuity of Care reports**

Num.	Category	Frequency	
		N	%
1	<i>Personalized care</i>		
	Good	51	93
	Average	4	7
2	<i>Holistic care</i>		
	Good	47	85
	Average	8	15
3	<i>Partnership care</i>		
	Good	12	22
	Average	43	78
4	<i>Collaborative care</i>		
	Good	55	100
	Average	0	0
5	<i>Evidence based care</i>		
	Good	55	100
	Average	0	0

From the table, the best comprehension is collaborative care and evidence based care aspect. Students'comprehension that still needs to improve is partnership care aspect.However, overall understanding of the aspects in the philosophy of maternity care "women centered care" is good.



## DISCUSSION

The results of this study are in line with Anue (1) and Gray (6) learning model midwife clinic *Continuity of Care* (PKK-CoC). This model is proven in giving broad chances to improve students' comprehension on the philosophy of maternity care "women centered care".

Brooke (2) and Carolan (3) stated that the philosophy of "women centered care" consists of cares that fulfill clients' needs, attend clients' physical, psychological, psychosocial, spiritual and cultural needs, collaborate with clients, consult and collaborate with other health institution when needed, and give case based on the latest literature available. Maternity care reports of D III midwife students of STIKES Estu Utomo Boyolali contain every aspect of philosophy of maternity care "women centered care" and the data contained are good written and clear.

## CONCLUSION

The practice of midwife clinic *continuity of care* in STIKES Estu Utomo Boyolali has applied the philosophy of maternity care "women centered care".

The comprehension of students of D III Kebidanan STIKES Estu Utomo Boyolali based on maternity care *continuity of care* reports can be categorized as good. Every student has good level of comprehension, especially on *personalized, holistic care, collaborative care* and *evidence based care* aspects. However, the comprehension on *partnership care* aspect need to be improved,

The students' comprehension can be seen through their application of every aspect and their ability on describing the procedure and function of every aspect. The quality of maternity care "*Continuity of Care*" in STIKES Estu Utomo Boyolali is good since the clients and their family are in good condition and there are zero mortality rates. The clients are also feel comfortable, safe and cared since they got correct and fast responses. The students then become more confidence, more skillful, and more competent.

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